Image# 10990836141

REPORT OF RECEIPTS AND DISBURSEMENTS FOR A COMMITTEE OR ORGANIZATION 111:/39

SUPPORTING A NOWINATING CONVENTI	ON (Sullillally Page))	
1. (a) Name of Committee (in full)	2. FEC Identification	2. FEC Identification Number	
2008 DEMOCRATIC NATIONAL CONVENTION COMMITTEE INC.	C00435560	C00435560	
4) 4) 4		tii (O. I. il	
(b) Address (Number and Street)		mittee/Organization	
430 South Capitol Street SE	X Convention	on Committee	
(c) City, State, and ZIP Code	Host Con	nmittee	
Washington DC 20003	Other	(if-)	
4. TYPE OF REPORT (check appropriate box(es))		(specify)	
(a) \(POST-CONVENTION REPORT\)			
QUARTERLY REPORT (check one) X April 15 July 15 Octob	per 15 January 31		
_	January 31		
☐ FINAL REPORT			
(b) Is this an Amendment? X YES NO			
SUMMARY OF RECEIPTS AND DISBURSEMENTS			
5. Covering period FROM: 01/01/2010 THROUGH: 03/31/2010			
SECTION A - CASH BALANCE SUMMARY	Column A	Column B Calendar Year-to-Date	
DESTIONA GASTI BALANCE GOMMATT	This period	Calendar Year-to-Date	
6. (a) Cash on Hand January 1. 2010		10070 40	
6. (a) Cash on Hand January 1, 2010		18978.43	
(b) Cash on Hand at Beginning of Reporting Period	18978.43		
(c) Total Receipts (From Line 20)	0.00	0.00	
(d) Subtotal (Add Lines 6(b) and 6(c) for Column A and 6(a) and 6(c) for Column B)	18978.43	18978.43	
() () () ()			
7. Total Disbursements (From Line 25)	14781.42	14781.42	
7. Total Dispulsements (From Line 23)			
O Cook on Hand of Olean of Bound's Project (O bland L'ex 7 (and L'ex 0(d))	4197.01	4197.01	
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d)) 9. Debts and Obligations Owed TO the Committee			
	0.00		
(Itemize all on Schedule C or Schedule D) 10. Debts and Obligations Owed BY the Committee			
_	0.00		
(Itemize all on Schedule C or Schedule D)			
SECTION B - SUMMARY OF EXPENDITURES SUBJECT TO LIMITATIONS			
<u> </u>			
	14781.42	14781.42	
11. Convention Expenditures (from line 21(c))	14701.42	14/01.42	
	0.00	0.00	
12. Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures (From Line 17(c))	0.00	0.00	
(a) Expenditures Subject to Limitation (Subtract Line 12 from Line 11)	14781.42	14781.42	
(b) Expenditures from Prior Years Subject to Limitation	16801781.57	16801781.57	
(5) = Apondicio de manifesta de Carinette de			
(a) Total Expanditures Subject to Limitation (Add Lines 19/a) and 19/b))		16816562.99	
(c) Total Expenditures Subject to Limitation (Add Lines 12(a) and 12(b))		_	
I certify that I have examined this report and to the best of my knowledge and	belief it is true, correc	ct, and complete.	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C., 437g.

For Further Information Contact:

Bradley Marshall

Federal Election Commission Toll Free 800/424-9530 Local 202/694-1100 07/09/2010

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS (PAGE 2 of FEC Form 4)

(PAGE 2 of FEC Form 4)		
Name of committee (in full) 2008 DEMOCRATIC NATIONAL CONVENTION COMMITTEE INC.	Report Covering the Perio	
2008 DEMOCRATIC NATIONAL CONVENTION COMMITTEE INC.	FROM: 01/01/2010	TO: 03/31/2010
RECEIPTS	Column A This period	Column B Calendar Year-to-Date
13. Federal Funds (Itemize all on Schedule A)	0.00	0.00
14. Contributions to Defray Convention Expenses:		
(a) Itemized (Use Schedule A)	0.00	
(b) Unitemized	0.00	
(c) Subtotal of Contributions to Defray Convention Expenses (Add Lines (14(a) and 14(b))	0.00	0.00
15. Transfers from Affiliated Committees	0.00	0.00
16. Loans and Loan Repayments Received (Add Lines 16(a) and 14(b))		
(a) Loans Received	0.00	
(b) Loan Repayments Received	0.00	
(c) Subtotal of Loans and Loan Repayments Received (add Line 14a and 14b)	0.00	0.00
17. Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures:		
(a) Itemized (Use Schedule A)	0.00	
(b) Unitemized	0.00	
(c) Subtotal of Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures (Add Lines (17(a) and 17(b))	0.00	0.00
18. Other Refunds, Rebates, Returns of Deposits:		_
(a) Itemized Other Refunds, Rebates, Returns of Deposits	0.00	
(b) Uniternized Other Refunds, Rebates, Returns of Deposits	0.00	
(c) Subtotal of Refunds, Rebates, Returns of Deposits (Add Lines 18(a) and 18(b))	0.00	0.00
19. Other Income		_
(a) Itemized (Use Schedule A)	0.00	
(b) Unitemized(c) Subtotal of Other Income (Add Lines 13, 14(c), 15, 16(c), 17(c), 18 (c) and 19(c))	0.00	0.00
(b) Cabicia of Cirici medine (188 Eines 15, 14(5), 15, 16(5), 17(6), 16 (5) and 16(6))	0.00	0.00
20. TOTAL RECEIPTS (Add Lines 13, 14(c), 15(c), 16(c), 17(c), 18(c) and 19(c))	0.00	0.00
DISBURSEMENTS		
21. Convention Expenditures:		
(a) Itemized (Use Schedule B)	14781.42	
(b) Unitemized	0.00	
(c) Subtotal of Convention Expenditures (Add Lines 21(a) and 21(b))	14781.42	14781.42
22. Transfers to Affiliated Committees	0.00	0.00
23. Loans and Loan Repayments Made (a) Loans Made	0.00	_
		_
(b) Loan Repayments Made	0.00	
(c) Subtotal of Loans and Loan Repayments Made (Add Lines 23(a) and 23(b))	0.00	0.00
24. Other Disbursements:		
(a) Itemized (Use Schedule B)	0.00	
(b) Unitemized	0.00	
(c) Subtotal of Other Disbursments (Add Lines 24(a) and 24(b))	0.00	0.00
	14781.42	14781.42
25. TOTAL DISBURSEMENTS (Add Lines 21(c), 22, 23(c) and 24(c))	1	1

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C.

age# 10990836143				
SCHEDULE B (FEC Form 4) ITEMIZED DISBURSEMENTS	for each category	Use separate schedule(s) for each category of the Detailed Summary Page		PAGE 3/7
Any Information copied from such Reports and Statemer or for commercial purposes, other than using the name a			son for the purpose of solic	
NAME OF COMMITTEE (In Full) 2008 DEMOCRATIC NATIONAL CONVENT	ON COMMITTEE INC	D.		
Full Name (Last, First, Middle Initial) AUTOMATIC DATA PROCESSING			Transaction ID: S Date of Disburseme	
Mailing Address P. O. BOX 9001006			01 / 20	Y 2010 Y
City St LOUISVILLE K	ate Zip Code Y 40290		Amount of Each Dis	sbursement this Period
	ent For: rimary General Other (specify) ▼	Category/ Type		-0.01
Full Name (Last, First, Middle Initial) AUTOMATIC DATA PROCESSING Mailing Address P. O. BOX 9001006			Transaction ID: S Date of Disburseme	
	ate Zip Code Y 40290		Amount of Each Dis	sbursement this Period
Purpose of Disbursement VOID CHECK Candidate Name		Category/]	-326.17
	ent For: rimary General Other (specify)	Туре		
Full Name (Last, First, Middle Initial) BANK OF AMERICA,NA Mailing Address			Transaction ID: S Date of Disbursement M M M / D D D 1 5	
REGIONAL CENTER, VA2-125-04-01 P.O.	BOX 27025 ate Zip Code A 23261		Amount of Each Dis	sbursement this Period
Purpose of Disbursement BANK CHARGES			1	57.13
	ent For: rimary General Other (specify)	Category/ Type		
SUBTOTAL of Disbursements This Page (optional)			\	-269.05
CODICIAL OI DISDUISCINGIIIS TIIIS FAYE (OPLIONAI)				, ,,,,,,,

TOTAL This Period (last page this line number only)

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age# 10990030144		
SCHEDULE B (FEC Form 4) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 4/7 (check only one)
Any Information copied from such Reports and Statements or for commercial purposes, other than using the name an		person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) 2008 DEMOCRATIC NATIONAL CONVENTION	ON COMMITTEE INC.	
Full Name (Last, First, Middle Initial) BANK OF AMERICA,NA		Transaction ID: SB21A.4213 Date of Disbursement
Mailing Address REGIONAL CENTER, VA2-125-04-01 P.O.	BOX 27025	02 M / D 16 / Y 2010 Y
City Stat RICHMOND VA	e Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement BANK CHARGES Candidate Name	Categ	57.42
	Typo the For: Imary General Ther (specify) ▼	e
Full Name (Last, First, Middle Initial) BANK OF AMERICA,NA Mailing Address	DOV 07005	Transaction ID: SB21A.4214 Date of Disbursement O 3
REGIONAL CENTER, VA2-125-04-01 P.O. City Stat RICHMOND VA		Amount of Each Disbursement this Period
Purpose of Disbursement BANK CHARGES		58.39
Candidate Name	Categ Typ	
President Ot	nt For: mary General her (specify) ▼	
State: District: Full Name (Last, First, Middle Initial) BANK OF AMERICA,NA		Transaction ID: SB21A.4219 Date of Disbursement
Mailing Address REGIONAL CENTER, VA2-125-04-01 P.O.	BOX 27025	03 7 15 7 2010
City Stat RICHMOND VA	e Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement BANK CHARGES		10.00
Candidate Name	Categ Typ	
	nt For: mary General her (specify) ▼	
State: District:		
SUBTOTAL of Disbursements This Page (optional)		125.81

TOTAL This Period (last page this line number only)

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	SCHEDULE B (FEC Form	4)			FOR LINE NUMBER:	PAGE 5/7
	TEMIZED DISBURSEMEN	-	Use separate sch for each category	nedule(s) of the	(check only one)	PAGE 5//
		. •	Detailed Summar	y Page	X 21a 22 23	a 23b 24a
	Any Information copied from such Reports or for commercial purposes, other than usi				son for the purpose of solicit	ing contributions
K	NAME OF COMMITTEE (In Full)	ig the name and add	ness of any politica	i committee t	O SOIICIT CONTINUUTIONS TOTALS	such committee
	2008 DEMOCRATIC NATIONAL	CONVENTION C	COMMITTEE INC) .		
A.	Full Name (Last, First, Middle Initial) CAREFIRST BLUECROSS BLUE	ESHIELDS			Transaction ID: SI Date of Disburseme	nt
	Mailing Address P. O. BOX 79749				01 20	Y ŽOŽOŠ
	City BALTIMORE	State MD	Zip Code 21279		Amount of Each Dis	bursement this Period
	Purpose of Disbursement VOID CHECK					-1270.38
	Candidate Name			Category/ Type		
	Office Sought: House Senate President	Disbursement For Primary Other (s				
_	State: District:					
В.	Full Name (Last, First, Middle Initial) CAREFIRST BLUECROSS BLUE	SHIELDS			Transaction ID: SI Date of Disburseme	nt
	Mailing Address P. O. BOX 79749				01 20	Ý 2010 [°]
	City BALTIMORE	State MD	Zip Code 21279		Amount of Each Dis	bursement this Period
	Purpose of Disbursement VOID CHECK				7	-1270.38
	Candidate Name			Category/ Type		
	Office Sought: House Senate President	Disbursement For Primary Other (s				
_	State: District: Full Name (Last, First, Middle Initial)					
C.	LEAH D. DAUGHTRY				Date of Disburseme	nt
	Mailing Address 700 SEVENTH ST., S.W.	#201			01 20	Y 2010 Y
	City WASHINGTON	State DC	Zip Code 20024		Amount of Each Dis	bursement this Period
	Purpose of Disbursement CONVENTION CONSULTING FEES	3		0 0	1	19078.00
	Candidate Name			Category/ Type	_	
	Office Sought: House Senate President	Disbursement For Primary Other (s				
	State: District:		. , ,			
	SUBTOTAL of Disbursements This Page	e (optional)		······	•	16537.24

TOTAL This Period (last page this line number only)

IIIIa	ge# 10990030140					
	CHEDULE B (FEC Form FEMIZED DISBURSEMEN	•	Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: (check only one)	PAGE 6/7 3a 23b 24a
	ny Information copied from such Reports for commercial purposes, other than usi				on for the purpose of solic	iting contributions
	NAME OF COMMITTEE (In Full) 2008 DEMOCRATIC NATIONAL	CONVENTION C	COMMITTEE INC).		
Α.	Full Name (Last, First, Middle Initial) FANCESCA GAGE				Transaction ID: S Date of Disbursem	ent
	Mailing Address 1841 COLUMBIA RD, NW	APT. #51			01 20	
	City WASHINGTON	State DC	Zip Code 20009		Amount of Each Di	sbursement this Period
	Purpose of Disbursement VOID CHECK				1	-0.96
	Candidate Name			Category/ Type	_	
	Office Sought: House Senate President	Disbursement For Primary Other (s				
_	State: District:					
В.	Full Name (Last, First, Middle Initial) SHANE GREIGO Mailing Address				Date of Disbursem M M M / D D D 2 0	ent
	3180 S. HALIFAX STREET					20.0
	City AURORA	State CO	Zip Code 80013		Amount of Each Di	sbursement this Period
	Purpose of Disbursement VOID CHECK				7	-976.89
	Candidate Name			Category/ Type		
	Office Sought: House Senate President	Disbursement For Primary Other (s				
	State: District: Full Name (Last, First, Middle Initial)				T	ND04 A 4004
C.	SHANE GREIGO				Transaction ID: S Date of Disbursem	ent
	Mailing Address 3180 S. HALIFAX STREET				01	y 2010 Y
	City AURORA	State CO	Zip Code 80013		Amount of Each Di	sbursement this Period
	Purpose of Disbursement VOID CHECK				1	-497.26
	Candidate Name			Category/ Type		
	Office Sought: House Senate President	Disbursement For Primary Other (s		, ,,		
	State: District:		· • • •			
	SUBTOTAL of Disbursements This Page	e (optional)				-1475.11

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 4) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 7/7 Use separate schedule(s) (check only one) for each category of the Detailed Summary Page χ 21a 22 23a Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) 2008 DEMOCRATIC NATIONAL CONVENTION COMMITTEE INC. Full Name (Last, First, Middle Initial) Transaction ID: SB21A.4209 **GUARDIAN** Date of Disbursement

	Mailing Address P.O.BOX 95101			01 20 7 2010
	City CHICAGO	State Zip Co IL 6069		Amount of Each Disbursement this Period
	Purpose of Disbursement VOID CHECK			-136.51
	Candidate Name		Category/ Type	
	Office Sought: House Senate President State: District:	Disbursement For: Primary Other (specify)	General	
3.	Full Name (Last, First, Middle Initial) C. ANTHONY JACKSON	Date of	Transaction ID: SB21A.4200 Date of Disbursement	
	Mailing Address P.O. BOX 383			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City RIBERA	State Zip Co NM 8756		Amount of Each Disbursement this Period
	Purpose of Disbursement VOID CHECK			-0.96
	Candidate Name		Category/ Type	
	Office Sought: House Senate President	Disbursement For: Primary Other (specify)	General	
	State: District:	(1 - 7)		

1		
SUBTOTAL of Disbursements This Page (optional)	<u> </u>	-137.47
TOTAL This Period (last page this line number only)	•	14781.42